

# DO/EO WORKSHEET

U.S. Appl. No. 09/646199

International Appl. No. PE 00/00129

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## INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE :

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| <input checked="" type="checkbox"/> International Application ( <i>RECORD COPY</i> )<br><input type="checkbox"/> Article 19 Amendments<br><input type="checkbox"/> PCT/IB/331<br><input type="checkbox"/> PCT/IPEA/409 IPER (PCT/IPEA/416 on front)<br><input type="checkbox"/> Annexes to 409<br><input checked="" type="checkbox"/> Priority Document (s) No. <u>1+1-2</u> | <input type="checkbox"/> International Appl. on Double Sided Paper ( <i>COPIES MADE</i> )<br><input type="checkbox"/> Request form PCT/RO/101<br><input checked="" type="checkbox"/> PCT/ISA/210 - Search Report<br><input checked="" type="checkbox"/> Search Report References<br><input type="checkbox"/> Other : _____ |
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## RECEIPTS FROM THE APPLICANT (*other than checked above*) :

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| <input checked="" type="checkbox"/> Basic National Fee ( <i>or authorization to charge</i> )<br><input checked="" type="checkbox"/> Description<br><input checked="" type="checkbox"/> Claims<br><input type="checkbox"/> Words in the Drawing Figure(s)<br><input type="checkbox"/> Article 19 Amendments<br><input type="checkbox"/> english transl. of annexes NOT present<br><input type="checkbox"/> entered <input type="checkbox"/> not entered : _____<br><input type="checkbox"/> not a page for page substitution<br><input type="checkbox"/> other : _____<br><input type="checkbox"/> Annexes to 409<br><input type="checkbox"/> english transl. of annexes NOT present<br><input type="checkbox"/> entered <input type="checkbox"/> not entered : _____<br><input type="checkbox"/> not a page for page substitution<br><input type="checkbox"/> other : _____ | <input checked="" type="checkbox"/> Preliminary Amendment(s) Filed on :<br>1. <u>14 Sept 00</u> 2. _____ 3. _____<br><input type="checkbox"/> Information Disclosure Statement(s) Filed on :<br>1. _____ 2. _____ 3. _____<br><input type="checkbox"/> Assignment Document<br><input checked="" type="checkbox"/> Power of Attorney/ Change of Address<br><input type="checkbox"/> Substitute Specification Filed on :<br>1. _____ 2. _____<br><input type="checkbox"/> Verified Small Status Statement (executed)<br><input checked="" type="checkbox"/> Oath/ Declaration (executed) <u>signed</u><br><input type="checkbox"/> surcharge was paid at the time of filing<br><input type="checkbox"/> DNA Diskette<br><input type="checkbox"/> Other : 1. _____ 2. _____ |
|---|--|

NOTES : ☐ IA. used as Specification ☐ Other :

35 U.S.C. 371 - Receipt of Request (PTO-1390)

Date Acceptable Oath/ Declaration Received

Date of Completion of requirements under 35 U.S.C. 371

102(e) Date

Date of Completion of DO/EO 906 - Notification of Missing 102(e) Requirements

Date of Completion of DO/EO 907 - Notification of Acceptance for 102(e) Date

Date of Completion of DO/EO 911 - Application Accepted Under 35 U.S.C. 111

Date of Completion of DO/EO 905 - Notification of Missing Requirements

Date of Completion of DO/EO 916 - Notification of Defective Response

Date of Completion of DO/EO 903 - Notification of Acceptance

Date of Completion of DO/EO 909 - Notification of Abandonment

14 Sept 00

01 NOV 00

03 Oct 00

09 NOV 00

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 646199	RECEIPT DATE:	09 / 14 / 00
IA NUMBER:	PCT/ DE00 / 00129	IA FILING DATE:	01 / 14 / 00
FAMILY NAME:	CLEMENS	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	JURGEN	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	01 / 14 / 99
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	0745/62947/N	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX

NAME: NORMAN H ZIVIN  
COOPER & DUNHAM  
STREET: 1185 AVENUE OF THE AMERICAS

CITY: NEW YORK  
STATE/COUNTRY: NY ZIP: 10036  
EMAIL:

APPLICATION TITLES:  
METHOD FOR AUTOMATICALLY DESIGNING CELLULAR MOBILE RADIOTELEPHONE NETWORKS

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